

Fill in this information to identify your case:

Debtor 1	Joseph Daniel Lynch		
	First Name	Middle Name	Last Name
Debtor 2	Kathleen Marie Lynch		
(Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: EASTERN DISTRICT OF PENNSYLVANIA			
Case number (if known)	19-11769		

Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1. Do any creditors have claims secured by your property?

No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.

Yes. Fill in all of the information below.

Part 1: List All Secured Claims

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

2.1	Commonwealth of PA - Dept of Revenue	Describe the property that secures the claim:	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
	Creditor's Name Bureau of Collections PO Box 280948 Harrisburg, PA 17128-0948	4009 Portland Street Coplay, PA 18037 Lehigh County	\$745.24	\$290,000.00	\$0.00
Number, Street, City, State & Zip Code					
Who owes the debt? Check one.					
<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim relates to a community debt					
Nature of lien. Check all that apply.					
<input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input checked="" type="checkbox"/> Other (including a right to offset) State Tax Lien					
Date debt was incurred 2013					
Last 4 digits of account number _____					

Debtor 1	Joseph Daniel Lynch			Case number (if known)	19-11769
	First Name	Middle Name	Last Name		
Debtor 2	Kathleen Marie Lynch				
	First Name	Middle Name	Last Name		

2.2	Commonwealth of PA - Dept of Revenue	Describe the property that secures the claim:	\$1,198.79	\$290,000.00	\$0.00
	Creditor's Name	4009 Portland Street Coplay, PA 18037 Lehigh County			
	Bureau of Collections PO Box 281041 Harrisburg, PA 17128-1041	As of the date you file, the claim is: Check all that apply.			
	Number, Street, City, State & Zip Code	<input type="checkbox"/> Contingent			
		<input type="checkbox"/> Unliquidated			
		<input type="checkbox"/> Disputed			
	Who owes the debt? Check one.	Nature of lien. Check all that apply.			
	<input type="checkbox"/> Debtor 1 only	<input type="checkbox"/> An agreement you made (such as mortgage or secured car loan)			
	<input type="checkbox"/> Debtor 2 only	<input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien)			
	<input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only	<input type="checkbox"/> Judgment lien from a lawsuit			
	<input type="checkbox"/> At least one of the debtors and another	<input type="checkbox"/> Other (including a right to offset)	State Tax Lien		
	<input type="checkbox"/> Check if this claim relates to a community debt				

Date debt was incurred **2003** Last 4 digits of account number _____

2.3	Commonwealth of PA - Dept of Revenue	Describe the property that secures the claim:	\$9,633.26	\$290,000.00	\$0.00
	Creditor's Name	4009 Portland Street Coplay, PA 18037 Lehigh County			
	Bureau of Collections PO Box 281041 Harrisburg, PA 17128-1041	As of the date you file, the claim is: Check all that apply.			
	Number, Street, City, State & Zip Code	<input type="checkbox"/> Contingent			
		<input type="checkbox"/> Unliquidated			
		<input type="checkbox"/> Disputed			
	Who owes the debt? Check one.	Nature of lien. Check all that apply.			
	<input type="checkbox"/> Debtor 1 only	<input type="checkbox"/> An agreement you made (such as mortgage or secured car loan)			
	<input type="checkbox"/> Debtor 2 only	<input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien)			
	<input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only	<input type="checkbox"/> Judgment lien from a lawsuit			
	<input type="checkbox"/> At least one of the debtors and another	<input type="checkbox"/> Other (including a right to offset)	State Tax Lien		
	<input type="checkbox"/> Check if this claim relates to a community debt				

Date debt was incurred **2002** Last 4 digits of account number _____

2.4	IRS	Describe the property that secures the claim:	\$25,483.68	\$290,000.00	\$0.00
	Creditor's Name	4009 Portland Street Coplay, PA 18037 Lehigh County			
	Department of the Treasury Andover, MA 01810	As of the date you file, the claim is: Check all that apply.			
	Number, Street, City, State & Zip Code	<input type="checkbox"/> Contingent			
		<input type="checkbox"/> Unliquidated			
		<input type="checkbox"/> Disputed			
	Who owes the debt? Check one.	Nature of lien. Check all that apply.			
	<input type="checkbox"/> Debtor 1 only	<input type="checkbox"/> An agreement you made (such as mortgage or secured car loan)			
	<input type="checkbox"/> Debtor 2 only	<input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien)			
	<input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only	<input type="checkbox"/> Judgment lien from a lawsuit			
	<input type="checkbox"/> At least one of the debtors and another	<input type="checkbox"/> Other (including a right to offset)	Federal Tax Lien		
	<input type="checkbox"/> Check if this claim relates to a community debt				

Date debt was incurred **2012** Last 4 digits of account number _____

Debtor 1	Joseph Daniel Lynch			Case number (if known)	19-11769
	First Name	Middle Name	Last Name		
Debtor 2	Kathleen Marie Lynch				
	First Name	Middle Name	Last Name		

2.5	Select Portfolio Servicing Inc	Describe the property that secures the claim:	\$157,387.00	\$290,000.00	\$0.00
	Creditor's Name	4009 Portland Street Coplay, PA 18037 Lehigh County			
	PO Box 65250 Salt Lake City, UT 84165-0250	As of the date you file, the claim is: Check all that apply.			
	Number, Street, City, State & Zip Code	<input type="checkbox"/> Contingent			
		<input type="checkbox"/> Unliquidated			
		<input type="checkbox"/> Disputed			
	Who owes the debt? Check one.	Nature of lien. Check all that apply.			
	<input type="checkbox"/> Debtor 1 only	<input type="checkbox"/> An agreement you made (such as mortgage or secured car loan)			
	<input type="checkbox"/> Debtor 2 only	<input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien)			
	<input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only	<input type="checkbox"/> Judgment lien from a lawsuit			
	<input type="checkbox"/> At least one of the debtors and another	<input type="checkbox"/> Other (including a right to offset) Mortgage			
	<input type="checkbox"/> Check if this claim relates to a community debt				

Date debt was incurred	2001	Last 4 digits of account number			
2.6	Westlake Financial Svcs	Describe the property that secures the claim:	\$101.00	\$2,690.00	\$0.00
	Creditor's Name	2006 Jeeep Grand Cherokee 140,000 miles			
	4751 Wilshire Blvd Los Angeles, CA 90010	As of the date you file, the claim is: Check all that apply.			
	Number, Street, City, State & Zip Code	<input type="checkbox"/> Contingent			
		<input type="checkbox"/> Unliquidated			
		<input type="checkbox"/> Disputed			
	Who owes the debt? Check one.	Nature of lien. Check all that apply.			
	<input type="checkbox"/> Debtor 1 only	<input type="checkbox"/> An agreement you made (such as mortgage or secured car loan)			
	<input type="checkbox"/> Debtor 2 only	<input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien)			
	<input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only	<input type="checkbox"/> Judgment lien from a lawsuit			
	<input type="checkbox"/> At least one of the debtors and another	<input type="checkbox"/> Other (including a right to offset) Auto Loan			
	<input type="checkbox"/> Check if this claim relates to a community debt				
Date debt was incurred	2013	Last 4 digits of account number			

Add the dollar value of your entries in Column A on this page. Write that number here:

\$194,548.97

If this is the last page of your form, add the dollar value totals from all pages.

\$194,548.97

Write that number here:

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

<input type="checkbox"/>	Name, Number, Street, City, State & Zip Code KML Law Group PC Suite 5000, BNY Mellon Independence Ctr 701 Market St Philadelphia, PA 19106	On which line in Part 1 did you enter the creditor? 2.5
		Last 4 digits of account number